

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

X660

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24. Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishm	ent Name	-	4	Telephone Number	Date of Ir	Ispection	PERMIT#
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Owner		popul	T. How Alban, 12 11130	Purpose:	Fallow v	n Deles	
Israc	1 / 4	رزل	·	_	Follow-up Release Date		
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- 11 - 12				2. Follow-up	Summary of Violations:		
Person in C	`harge			6. Complaint		. ,,)
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Responsible				5. Temporary	Monu Type (Cae heat of man)		
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Certified Fo	ood Manac	ær		7. Other (list)		🗸	' <u> </u>
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• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"							
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"							
Section#	C/NC	R	Narrative Narrative			To Be Co	rrected By
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